

## Editorials and Association Notes

### Manitoba Medical Review

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102 MEDICAL ARTS BUILDING, WINNIPEG

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### Canadian Medical Association Convention at Jasper

The 1942 Convention of the Canadian Medical Association at Jasper June 15th to 19th was memorable in several respects. The beauty of the mountain scenery, the accessibility of the golf course and other holiday pursuits and the excellent quarters and cuisine made a thoroughly enjoyable combination. The fact that most of the 575 doctors who attended were able to live in close proximity at the lodge instead of being scattered over a large city, helped greatly in promoting social and professional contacts.

The General Council of the Canadian Medical Association passed in principle the idea of Health Insurance based on the 18 points, somewhat amended. Some knotty problems such as section 12 and the question of teaching material were left to provincial regulating boards. The government is giving five seats on the Procurement and Assignment Board for medical personnel in the armed forces to Canadian Medical Association appointees.

Most of the scientific papers were of a high order. Many who came to listen to certain papers with dismal titles found stimulation, wit, and new ideas instead of boredom.

At one luncheon meeting a question and answer period was very popular. Written questions were sent up to the head table to be answered impromptu by a panel of specialists, including Dr. Alan Brown, Dr. Duncan Graham, Dr. G. S.

Fahrni, Dr. Paul O'Leary of Mayo's, and Dr. J. D. McQueen.

The following Manitoba doctors presented papers or lead discussions: D. C. Aikenhead, Ross Mitchell, J. D. McQueen, P. H. T. Thorlakson, J. D. Adamson, O. J. Day, M. R. McCharles, C. W. Burns, A. R. Birt, F. G. Allison, F. D. McKenty, Gordon Chown, Harry Medovy, H. D. Morse.

Quite a number of Manitoba men attended the convention.

Doctor G. S. Fahrni gave the Presidential Address: "Medicine and the Nation." He touched on many topics, but health insurance was his major theme. The Gallup Poll has shown that 75% of Canadians are in favor of health insurance. Doctor Fahrni saw two reasons for bringing in a comprehensive health plan before the war ends: the sense of security it would give the population during post-war reconstruction, and the wisdom of coming to an agreement now, before our government becomes too bureaucratic.

### On Preparing Hypodermic Injections

When leaving on a call for which a hypo may be needed, it may save time to request the relatives by telephone to put an inch or two of water on to boil in a small saucepan.

To prepare the injection drop the hypo tablet into the barrel of the syringe, put in the plunger until it nearly touches the tablet, attach and test the needle, tie a piece of string around the barrel of the syringe and immerse the syringe in the boiling water for two minutes. Leave the end of the string hanging over the side of the saucepan so that the syringe may be lifted out aseptically and painlessly. Some of the boiled water may be sucked up in the syringe as soon as it is cool enough to handle, and the injection is ready.

This method is simple, speedy and sterile. It avoids open flames, spoons or unsterile syringes kept in alcohol.

### District Society Notes

#### Northwestern Medical Society

The North Western Medical Society held its second meeting of the year at Virden, on June 10th. The speakers were Doctors W. F. Abbott and H. E. Popham.

Doctor Abbott spoke on, "Cystocele and Prolapse of the Uterus." His approach to the sub-

ject was somewhat new to most of the audience and was made interesting and profitable. Doctor Popham spoke on, "Some of the Commoner Problems in Infant Feeding." He was definite in his statements and was followed with great interest.

The members of the Society are always grateful to those speakers who are good enough to come to these meetings to give of their knowledge and experience.

The ladies were entertained at the home of Mrs. O. S. Ross. All met at supper at the Central Hotel where a jolly time was spent.

The Secretary, Doctor E. D. Hudson, Hamiota, was not present, as he had started that day for Jasper, Alberta, to attend the Canadian Medical Association meeting, where he will receive his Senior Membership in that Association.



The Portage and District meeting (Central District Society) was held at Portage on May 6th.

Doctor F. G. McGuinness spoke on "The Early Recognition of the Onset of Toxaemia in Pregnancy." Doctor Gordon Chown gave a practical demonstration and talked on, "Some Aspects of Infant Feeding."

Doctor G. S. Fahrni, President of the Canadian Medical Association and Doctor H. D. Kitchen, President of the Manitoba Medical Association were also present, and spoke on medical problems, dealing particularly with health insurance.

### **Brandon and District Medical Society**

The Brandon and District Medical Society held a meeting on May 6th.

The speakers were Doctors Chas. Hunter and Doctor Neil J. Maclean. Doctor Hunter spoke on "Common Errors in Medical Practice." Doctor N. J. Maclean spoke on "Some Phases of Appendicitis."

### **Winnipeg Medical Society**

The Winnipeg Medical Society held their Annual Meeting on May 15th in the Physiology Lecture Theatre of the Medical College.

Doctor J. C. Hossack, President, was the speaker for the evening, the title of his paper being, "I Swore by Apollo."

The following Officers for the year 1942-43 were elected:

President—Doctor C. B. Stewart.  
Vice-President—Doctor C. M. Strong.  
Secretary—Doctor H. F. Cameron.  
Treasurer—Doctor D. Swartz.  
Trustee—Doctor J. E. Tisdale.

### **Manitoba Medical Association**

The Annual Meeting of the Manitoba Medical Association will be held in the Fort Garry Hotel on September 23rd, 24th and 25th.

A team composed of the Canadian Medical Association President, Doctor A. E. Archer of Lamont, Alberta; Doctor W. F. Gillespie, and Doctor John Scott, of Edmonton, accompanied by the General Secretary, Doctor T. C. Routley will be here.

### **Manitoba Health Officers' Association**

The President of the Manitoba Health Officers' Association, Doctor George Clingan, advises that it has been decided to hold the first annual meeting of the Association on Tuesday, September 22nd, the day before the opening of the annual meeting of the Manitoba Medical Association.

There will be further information later and each Health Officer in the Province will receive a personal notice. There will be a very much worth-while programme.

### **W. K. Kellogg Foundation Donates \$10,000 for Student Loans**

Ten thousand American dollars have been donated to the Manitoba Medical College by the W. K. Kellogg Foundation of Battle Creek, Michigan. Dean Mathers announced that it will be used as a loan fund to assist medical students whose new seven-week summer holiday is not long enough to earn enough money to carry on. Fourth and fifth years are largely taken care of by being allowed to enlist in the army and drawing a private's pay during the final years at college. Five per cent interest will be charged dating from one year after graduation. During war-time the provincial and dominion governments have also agreed to loan money to students on a dollar-for-dollar basis.

### **Frank W. Horner, Limited, Gift for Clinical Research**

A year ago Frank W. Horner, Limited, Pharmaceutical Manufacturers of Montreal, donated \$600 to the Manitoba Medical College. It was decided to use this gift in the Department of Medicine for Clinical Research. Some of the money was used last year in the study of the effect of operative procedures on blood pressure conducted by Dr. Sarah Dubo.



### *The Rising Tide*

Like the tide at flow, every wave rising just a little higher than the last, so the symptoms of the climacteric, slight at first, gradually increase in severity. "Emmenin" therapy, instituted when the menopause first manifests itself, will usually alleviate the symptoms and subsequently keep them under control. If the syndrome is well established before treatment is begun, "Premarin" is recommended to bring the severe symptoms under control quickly. Clinical investigation indicates that this new product is the most potent orally-active natural oestrogen so far discovered.

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*Descriptive literature will be furnished on request.*



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## Department of Health and Public Welfare

### COMMUNICABLE DISEASE REPORT

April 23—May 20, 1942

**MEASLES:** Total 615—Winnipeg 352, St. Boniface 64, Brandon 45, Portage la Prairie City 20, Emerson Town 19, Daly 10, St. Paul East 9, Kildonan West 7, Oakland 7, St. Vital 6, Bifrost 5, Montcalm 5, Kildonan East 4, Swan River Town 4, Beausejour 3, St. James 3, Tuxedo 3, Unorganized 3, Flin Flon 2, Ritchot 2, Tache 2, Brokenhead 1, Brooklands Village 1, Hamiota Village 1, Hanover 1, Kildonan North 1, Miniota 1, Minnedosa Town 1, Morris Rural 1, Pipestone 1, Portage la Prairie Rural 1, Ste. Anne 1, St. Clements 1, Whitehead 1, Whitewater 1. (Late Reported: Miniota 7, Neepawa Town 5, St. Boniface 3, Brandon 2, Portage la Prairie City 2, Piney 1, Emerson Town 1, Rockwood 1, St. Vital 1, Woodlands 1, Woodworth 1, Unorganized 1).

**MUMPS:** Total 358—Winnipeg 107, Brandon 59, Portage la Prairie City 52, Transcona Town 30, St. Boniface 25, Tuxedo Town 22, St. James 11, Selkirk 7, Unorganized 4, Fort Garry 3, Minnedosa Town 3, Pipestone 3, Daly 2, Emerson Town 2, Hamiota Rural 2, Hamiota Village 2, Kildonan East 2, Portage la Prairie Rural 2, Sifton 2, Virden Town 2, Whitehead 2, Arthur 1, Bifrost 1, Kildonan West 1, Lansdowne 1, Ritchot 1, Rivers Town 1, Souris Town 1, St. Vital 1. (Late Reported: Portage la Prairie City 2, Brandon 1, Brooklands Village 1, St. James 1, Tuxedo 1.)

**CHICKENPOX:** Total 131—Winnipeg 80, St. Boniface 13, Unorganized 11, Kildonan East 6, The Pas Town 3, Daly 2, Flin Flon 2, Brooklands Village 1, Ethelbert 1, Fort Garry 1, Lac du Bonnet 1, Lansdowne 1, Melita Town 1, Norfolk North 1, Portage la Prairie Rural 1, Rivers Town 1, Tuxedo 1, St. James 1. (Late Reported: Brooklands Village 1, Ethelbert 1, Unorganized 1).

**SCARLET FEVER:** Total 129—Winnipeg 64, Brandon 21, Tuxedo Town 7, Portage la Prairie City 4, Cornwallis 3, Flin Flon 3, St. James 3, Blanshard 2, Neepawa Town 2, Portage la Prairie Rural 2, Saskatchewan 2, Souris Town 2, Emerson Town 1, Fort Garry 1, Harrison 1, Miniota 1, Roblin Rural 1, Roblin Village 1, Springfield 1, Transcona Town 1, Wallace 1. (Late Reported: Miniota 3, Portage la Prairie City 1, Shell River 1).

**TUBERCULOSIS:** Total 52—Winnipeg 13, Unorganized 8, Portage la Prairie City 7, Wallace 4, Brandon 2, Ritchot 2, St. Vital 2, Cypress North 1, Dauphin Town 1, DeSalaberry 1, Kildonan East 1, Lac du Bonnet 1, Lakeview 1, Norfolk South 1, Portage la Prairie Rural 1, Rossburn Rural 1, Rosser 1, Shoal Lake Rural 1, Siglunes 1, St. Clements 1, The Pas 1.

**GERMAN MEASLES:** Total 28—Pipestone 5, Portage la Prairie City 4, Tuxedo Town 4, Brandon 3, Hamiota Rural 3, Fort Garry 2, Norfolk North 2, Oak Lake Town 1, St. Boniface 1, St. Vital 1. (Late Reported: Winchester 2).

**DIPHTHERIA:** Total 16—Winnipeg 7, Kildonan 4, St. James 2, Gimli Village 1, The Pas Town 1, Tuxedo Town 1.

**WHOOPING COUGH:** Total 12—Winnipeg 5, Transcona 4, St. James 1, Flin Flon 1. (Late Reported: Flin Flon 1).

**LOBAR PNEUMONIA:** Total 10—Brandon 2, Ste. Anne 2, Hanover 1, La Broquerie 1, Ochre River 1, Wallace 1, Whitehead 1, Unorganized 1.

**ERYSIPELAS:** Total 6—Winnipeg 4, Melita Town 1, Westbourne 1.

**ANTERIOR POLIOMYELITIS:** Total 5—Gilbert Plains 1. (Late Reported: St. Andrews 2, Norfolk North 1, Brooklands Village 1).

**INFLUENZA:** Total 5—Winnipeg 2, Portage la Prairie City 1. (Late Reported: Dauphin Town 1, Portage la Prairie City 1).

**BACILLARY DYSENTERY:** Total 3—(Late Reported: Hanover 3).

**ENCEPHALITIS:** Total 2—Portage la Prairie Rural 1. (Late Reported: Unorganized 1).

**TYPHOID FEVER:** Total 2—(Late Reported: Selkirk 1, Unorganized 1).

**SEPTIC SORE THROAT:** Total 2—Brandon 1, Daly 1.

**UNDULANT FEVER:** Total 2—Winnipeg 1. (Late Reported: Portage la Prairie City 1).

**MENINGOCOCCAL MENINGITIS:** Total 1—Winnipeg 1.

**TRACHOMA:** Total 1—St. Clements 1.

**DIPHTHERIA CARRIERS:** Total 1—Winnipeg 1.

**PARA TYPHOID B:** Total 1—Cypress South 1.

**VENEREAL DISEASE:** Total 167—Gonorrhoea 96, Syphilis 71.

**TREATY INDIANS:** Total 17—Mumps 12, Tuberculosis 3, Diphtheria 1, Diphtheria Carriers 1.

### DEATHS FROM COMMUNICABLE DISEASES

April, 1942

**URBAN—**Cancer 43, Tuberculosis 11, Pneumonia Lobar 5, Pneumonia (other forms) 10, Influenza 5, Diphtheria 2, Syphilis 2, Lethargic Encephalitis 1, Measles 1. Other deaths under 1 year 15. Other deaths over one year 201. Stillbirths 21. Total 317.

**RURAL—**Cancer 30, Pneumonia Lobar 2, Pneumonia (other forms) 17, Tuberculosis 11, Influenza 3, Measles 2, Diphtheria 1, Cerebrospinal Meningitis 1, Lethargic Encephalitis 1, Scarlet Fever 1, Syphilis 1, Typhoid Fever 1, Dysentery 1. Other deaths under one year 17. Other deaths over one year 187. Stillbirths 20. Total 296.

**INDIANS—**Tuberculosis 9, Pneumonia Lobar 1, Pneumonia (other forms) 7, Cancer 1, Influenza 1, Puerperal Septicemia 1. Other deaths under one year 4. Other deaths over 1 year 8. Stillbirths. 0. Total 32.

DISEASES	Manitoba April 23 to May 20	Ontario April 15 to May 16	Saskatchewan April 15 to May 16	Minnesota April 15 to May 16	North Dakota April 15 to May 16
Amebic Dysentery	1			2	
Anterior Poliomyelitis	1		1	1	
Meningococcal Meningitis	1	30	1		
Chickenpox	128	881	134	323	
Diphtheria	16	5	14	8	7
Erysipelas	6	8	5	4	
Influenza	3	12	17	2	90
Leth. Encephalitis	1		3		2
Measles	589	739	67	3733	165
German Measles	26	243	51		
Mumps	352	1705	808		
Scarlet Fever	124	881	173	246	49
Septic Sore Throat	2	6			
Smallpox				1	
Trachoma	1		2		
Tuberculosis	52	223	31	40	60
Typhoid Fever		10		2	3
Typh. Para-Typhoid	1	3	10		
Undulant Fever	1	9	2		
Whooping Cough	11	365	1	148	40
Gonorrhoea	96	434			32
Syphilis	76	431			30

Manitoba is still having too much Diphtheria, note those sixteen cases and compare our population with that of Ontario and Minnesota. We still supply toxoid free,—how about it? Ontario had thirty cases of Meningococcal Meningitis reported. It is rather surprising that the incidence of this disease has not increased more during wartime. Measles, Mumps and Scarlet Fever are quite prevalent. Smallpox—one case in Minnesota.

Encephalitis and Poliomyelitis both show a few cases reported, in fact, at the time of writing (June 17, 1942) Manitoba has had eleven cases of Poliomyelitis reported in 1942 and eight cases of Encephalitis. The area between Haywood and Bruxelles has had two of these cases of Encephalitis and four of Poliomyelitis. It seems that the virus infection of both these diseases is widely distributed and we must be on the alert for outbreaks.